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INFORMATION DISCLOSURE		First Named Inventor	Derya Olgen				
STATEMENT BY APPLICANT (Use as many sheets as necessary)				Group Art Unit			
				Examiner Name	TBA		
Sheet	1	of	1	Attorney Docket Number	042933/312023		

Examiner Initials*	Cite No.	<u>Document Number</u> Number - Kind Code (if known)	Publication Date MM-DD-YYYY	Name of Patentee or Applicant of Cited Document	Pages, Columns, Lines, Where Relevant Passages of Relevant Figures Appear
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Examiner	/Adal Vaugast/	Date	05/22/2008
Signature	/Adel Yousset/	Considered	00,22,2000

<sup>\*</sup>Examiner: Initial if reference considered, whether or not citation is in conformance with MPEP 609. Draw line through citation if not in conformance and not considered. Include copy of this form with next communication to applicant.